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26123 7590 01/21/2005

BORDEN LADNER GERVAIS LLP  
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04/21/2005 RECEIVED 00000095 501593 10695910

01 FC:2501  
02 FC:1504

700.00 BA

FILING DATE

FIRST NAMED INVENTOR

ATTORNEY DOCKET NO.

CONFIRMATION NO.

10/695.910

10/30/2003

Mohammad Shahanshah Akhter

PAT 811-2 US

:673

TITLE OF INVENTION: METHOD AND APPARATUS FOR ERROR CONTROL CODING IN COMMUNICATION SYSTEMS USING AN OUTER INTERLEAVER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	04/1/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
JEANGLAUDE, JEAN BRUNER	2819	341-050000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Anne Kinsman  
2. Borden Ladner  
3. Gervais LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SpaceBridge Semiconductor Corporation

Hull, Quebec, CANADA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies

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Authorized Signature

Date April 20, 2005

Typed or printed name L. Anne Kinsman

Registration No. 45,291

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### CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that these papers, consisting of 4 pages total, are being facsimile transmitted to the Patent and Trademark Office 703-746-4060 on the date shown below.

DATE: April 21, 2005

  
L. Anne Kinsman

Registration No.: 45,291

TO THE ATTENTION OF: Examiner Jean Bruner JEANGLAUDE  
MAIL STOP: MAIL STOP ISSUE FEE  
COMPANY: United States Patent and Trademark Office  
CITY: Arlington, Virginia, U.S.A.  
FAX NUMBER: 703-746-4000  
DATE / TIME: April 21, 2005  
FROM: L. Anne Kinsman  
DIRECT DIAL: (613) 237-5160  
OUR FAX NUMBER: (613) 787-3558

RE: United States Patent Appln No. 10/695,910  
Title: METHOD AND APPARATUS FOR ERROR CONTROL CODING  
IN COMMUNICATION SYSTEMS USING AN OUTER  
INTERLEAVER  
Inventor(s): AKHTER, Mohammad, Shahanshah; WOOD, Robert;  
MASCIOLI, Antonio  
Our File: PAT 811-2 US

NUMBER OF PAGES, INCLUDING THIS PAGE: 4  
CONFIRMATION TO FOLLOW: NONE

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## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

3

Application Number	10/695,910
Filing Date	October 30, 2003
First Named Inventor	Mohammad Shahanshah AKHTER et al.
Art Unit	2869
Examiner Name	Jean Bruner JEANGLAUDE
Attorney Docket Number	PAT 811-2

### ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Form PTOL-85 Fee(s) Transmittal
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Borden Ladner Gervais LLP		
Signature			
Printed name	L. Anne Kinsman		
Date	April 21, 2005	Reg. No.	45,291

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